



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4054

SERIAL NUMBER 10/550,947	FILING OR 371(c) DATE 09/21/2006 RULE	CLASS 349	GROUP ART UNIT 2883	ATTORNEY DOCKET NO. 032879-052
------------------------------------	-----------------------------------------------------------	---------------------	-------------------------------	------------------------------------------

APPLICANTS

Tadashi Ito, Minami-ashigara-shi, JAPAN;
 Junichi Hirakata, Minami-ashigara-shi, JAPAN;

**** CONTINUING DATA *******

This application is a 371 of PCT/JP04/04324 03/26/2004

**** FOREIGN APPLICATIONS *******

JAPAN 2003-090438 03/28/2003
 JAPAN 2003-090439 03/28/2003
 JAPAN 2003-202225 07/28/2003
 JAPAN 2003-202226 07/28/2003
 JAPAN 2004-082200 03/22/2004
 JAPAN 2004-082201 03/22/2004

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/07/2006

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>BWA</i> Initials	STATE OR COUNTRY JAPAN	SHEETS DRAWING 2	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------	----------------------------	---------------------------	--------------------------------

ADDRESS

21839

TITLE

Liquid crystal display device

FILING FEE RECEIVED 1630	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------